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PTO/SB/17 (07-06)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known					
			Application Number		09/656,995-Conf. #2239			
FEE TRANSMITTAL			Filing Date	S	September 7, 2000			
'	First Named In	First Named Inventor Takao MIYAZAKI						
	Examiner Name L. T. Nguyen							
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2622		622			
TOTAL AMOUNT OF PAYMENT (\$) 1,360.00			Attorney Docket	No. 0	0378-0374P			
METHOD OF PA	YMENT (check a	ill that apply)	·					
X Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above	ve-identified depos	sit account, the Director is	hereby authorize	ed to: (check	call that apply))		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULAT	ION							
1. BASIC FILING, S	EARCH, AND EX	AMINATION FEES	-					
	FIL		ARCH FEES	EXAMIN.	ATION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)		
Utility	300	150 500	250	200	100	100310	10 (4)	
Design	200	100 100	50	130	65		•	
Plant	200	100 100	150	160	80			
Reissue	300	150 500	250	600				
Provisional	200	100 0	0	000	300 0			
		100 0	U	U	U			
2. EXCESS CLAIM	FEES					Fee (\$)	Fee (\$)	
Fee Description Each claim over 20 (including Reissues)						50	25	
Each independent claim over 3 (including Reissues)						200	100	
Multiple dependent	•	unig Keissues)				360	180	
Total Claims	Extra Claims	Fee (\$) Fee I	Paid (\$)	Mar	Multiple Dependent Cl		100	
Total Claims	X	<u> </u>	αια (ψ)		`			
HP = highest number o		if greater than 20.		1 66	741	Fee Paid (\$)		
Indep. Claims	Extra Claims	Fee (\$) Fee I	Paid (\$)				-	
	x	-						
HP = highest number o	f independent claims p	paid for, if greater than 3.						
3. APPLICATION S	IZE FEE						-	
		eed 100 sheets of paper						
		ne application size fee du			tity) for each a	dditional 50		
		U.S.C. 41(a)(1)(G) and			- 4	F B	-1-1 (6)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$)						ree P	<u>aid (\$)</u>	
100 = /50 (round up to a whole number) x = 4. OTHER FEE(S)								
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., are filing surpharge): 1801 Request for continued examination (RCE) (see 37 790.00								
1266 Extension for response within third month 570.00								
SUBMITTED BY	***/) 						
Signature		\forall	Registration No.	40.430	Talank	(702) 205	902E	
and institute		\sim	(Attorney/Agent)	40,439	Telephone	(703) 205	-0033	



December 1, 2006

Date

Name (Print/Type)

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